

STAFF SUMMARY SHEET							
	TO	ACTION	SIGNATURE (<i>Surname</i>), GRADE AND DATE		TO	ACTION	SIGNATURE (<i>Surname</i>), GRADE AND DATE
1	Program Director	Coord		6			
2	Squadron CC	Coord		7			
3	59 MDOG CC	Coord		8			
4	59 MDW CC	Sign		9			
5				10			
SURNAME OF ACTION OFFICER AND GRADE			SYMBOL		PHONE		TYPIST'S INITIALS
SUBJECT							DATE
SUMMARY							
<p>1. LEAVE / TDY LOCATION:</p> <p>2. TYPE OF LEAVE (circle one): TDY PTDY ORDINARY LEAVE EMERGENCY OTHER:_____</p> <p>3. READINESS (SrA Cassandra Trejo): YES / NO</p> <p>4. TRAINING:</p> <p style="padding-left: 20px;">A. Force Protection/Anti-Terrorism Training Date Completed:</p> <p style="padding-left: 20px;">B. SERE 100, Level "B" Training Date Completed:</p> <p style="padding-left: 20px;">C. High Risk Capture (HRC) Training (if applicable) Date Completed:</p> <p style="padding-left: 20px;">D. Human Relations Training Date Completed:</p> <p style="padding-left: 20px;">E. OSI Briefing (if applicable, not required for Canada, Mexico, Western Eruope) call 671-9465 to schedule appt. Date Completed:</p> <p style="padding-left: 20px;">F. Member should also visit www.fcg.pentagon.mil, to see non-classified info about the country they are travelling to.</p> <p>5. INVOLVEMENT IN HIGH-RISK ACTIVITY: YES / NO If answered yes above, member must complete AETC Form 410.</p> <p>6. ALL DUE EPRs / OPRs COMPLETED: YES / NO</p> <p>7. PRINT NAME _____ SIGNATURE _____ DATE _____</p>							